



King County

Department of Adult and Juvenile Detention

Community Corrections Division
516 – 3^d Ave. Room 1028
Seattle, Washington 98104

(206)296-1240
(206)296-1797-FAX

Appt.Date _____
Appt. Time _____

Print Name

KING COUNTY DEPARTMENT OF ADULT AND JUVENILE DETENTION Community Corrections Programs

The enrollment packet for the Work Education Release (WER) program and the Electronic Home Detention program is contained in this document.

The forms and informational handouts contained in this bundle are used to enroll in WER and EHD. Some of the forms may not apply to your particular situation. If you do not understand some of the forms or policies, these can be explained to you at your intake interview or your program orientation.

As you fill out these forms, please do the best you can to be complete and accurate. It will greatly facilitate your processing into your particular program if you can present a completed application packet to your intake caseworker.

You must make every effort to keep your scheduled appointment. Failure to do so may result in your having to report to the King County Jail to begin serving your sentence. We will not reschedule your appointment as a matter of routine.

DO NOT BRING CHILDREN TO THE INTERVIEW WITH YOU

A NON-REFUNDABLE FEE OF \$25.00 IS REQUIRED AT THE TIME OF THE INTERVIEW. NO PERSONAL CHECKS ARE ACCEPTED. CASH OR MONEY ORDER ONLY.

**KING COUNTY DEPARTMENT OF ADULT AND JUVENILE DETENTION
COMMUNITY CORRECTIONS PROGRAM**

Escape from Any Community Corrections Program

RCW 9A.76.110 Escape in the 1st Degree.

1. Escape in the 1st Degree is a Class B felony.

A person is guilty of escape in the first degree if he or she knowingly escapes from custody or a detention facility while being detained pursuant to a conviction of a felony or an equivalent juvenile offense.

RCW 9A.76.120 Escape in the 2nd Degree.

A person is guilty of Escape in the 2nd Degree if:

- (a) He or she knowingly escapes from a detention facility; or
- (b) Having been charged with a felony or an equivalent juvenile offense, he or she knowingly escapes from custody; or
- (c) Having been committed under chapter 10.77 RCW for a sex, violent, or felony harassment offense and being under an order of conditional release, he or she knowingly leaves or remains absent from the state of Washington without prior court authorization.

RCW 9A.76.130 – Escape in the 3rd Degree

A person is guilty of escape in the third degree if he or she escapes from custody.

* * * *

I, _____, hereby acknowledge that I have read and understand the rules of the Community Corrections Program. I also acknowledge that I have read and understand the above RCW'S (9A.76.110, 9A.76.120 and 9A.76.130). I further understand that a violation of the Community Corrections Programs (Work Education Release and Electronic Home Detention) rules will result in disciplinary action as prescribed by same and, further, if I walk away from, leave without proper authorization, fail to return to, or abscond from, my approved residence or any facility or person to whose charge I have been committed, I will be charged with Escape as provided for under the above RCW'S, and will be prosecuted for said crime.

Signature

Date

Witness

Date

Community Corrections Programs
Personal Information Sheet

Client Name:	Alias:
Street Address:	Phone:
City/State:	Zip Code:
Spouse/Personal Friend:	
Street Address/Apt:	Phone:
City/State:	Zip:
Place of Work:	Phone:
Mother:	
Street Address/Apt:	Phone:
City/State:	Zip:
Place of Work:	Phone:
Father:	
Street Address/Apt:	Phone:
City/State:	Zip:
Place of Work:	Phone:
Relative Name/Relationship:	
Street Address/Apt:	Phone:
City/State:	Zip:
Relative/Relationship:	
Street Address/Apt:	Phone:
City/State:	Zip:
Personal Reference Who You See Regularly:	
Street Address/Apt:	Phone:
City/State:	Zip:
Place of Work:	Phone:
Personal Reference Who You See Regularly:	
Street Address/Apt:	Phone:
City/State:	Zip:
Place of Work:	Phone:

Providing Insufficient, Inaccurate, or False Information Is Cause For Ineligibility, Denial And/Or Removal From The Program.

Signed _____ Date _____ Witness _____
KCDAD F-768 05/09

**KING COUNTY DEPARTMENT OF ADULT AND JUVENILE DETENTION
COMMUNITY CORRECTION PROGRAM
INMATE AGREEMENT**

I, _____, as a participant in the King County Community Corrections and per the City and County Jails Act of 1979, codified in the law as RCW 70.48.210, hereby assign unto the Chief Law Enforcement Office and the Community Corrections Administrator of King County Washington all monies to become due me during my participation in the Community Corrections Programs. I will not incur any debts for financial obligation while an inmate in these programs without prior knowledge and permission of the Community Corrections Administrator or assigned Caseworker. I agree that no deductions are to be made from my checks except those deductions lawfully required, such as Federal Withholding Tax, Social Security. (Bonds or other legitimate deductions already being taken out prior to my sentencing may be approved or disapproved by the Program Administrator or assigned Caseworker.) I also hereby authorize the Community Corrections Administrator to monitor this money in the following manner: a) deduct payment for board, room or administrative costs while I am a Community Corrections participant at \$_____ per day. This rate is determined by a sliding scale based on hourly rate of gross pay; b) disburse to me upon request subject to administrative approval an amount they need for their support and maintenance; c) disburse upon request and subject to administrative approval monies to any person, company or organization for payment of obligations; d) disburse upon request and subject to administrative approval monies to the court to satisfy existing fines, restitution or court costs; e) any balance of funds will be retained and upon completion of program will be released to me.

I understand that room and board or administrative costs are deducted from checks prior to the payment of creditors, court costs and fines, restitution or family obligations. I also understand that all requests for withdrawal are subject to the approval of the Community Corrections assigned Caseworker. All exceptions to the above must be approved by the Community Corrections Administrator.

If my sentence is 30 days or less, I may be required to pay my room and board fees in advance, therefore, I may not be required to have my paychecks mailed to the Program. **(A further explanation will be given to me at the time of my orientation into the Program.)**

I understand that all monies owed for room and board must be paid in full prior to my release. Money orders, cashier checks or cash are acceptable; personal checks are not. Additionally, if I am terminated or escape from a Community Corrections Program; and if I owe monies for room and board or administrative costs, I understand that any monies left in my trust fund will be forfeited and applied to my outstanding debt. Lastly, I understand that if I leave the Community Corrections Programs owing monies and if I am at any future date booked into the King County jail, any gate money on my person will be forfeited to satisfy my outstanding Community Corrections debt.

If there is a pending action, or during my participation in the Community Corrections Program, a bankruptcy petition is filed by me, my creditor or my attorney on my behalf, I will personally inform my caseworker of the filing. I will also have King County Department of Adult and Juvenile Detention, Community Corrections Division, located at 500 – 5th Avenue, Seattle, WA 98104 listed on the bankruptcy matrix.

SIGNED: _____

WITNESSED: _____

DATE: _____

**RESULTS IN UNTIDINESS, IT WILL BE REVOKED.
KING COUNTY DEPARTMENT OF ADULT AND JUVENILE DETENTION
COMMUNITY CORRECTIONS PROGRAMS**

WORK/EDUCATION/RELEASE RESPONSIBILITY CONTRACT (PROPERTY)

I, the undersigned, agree to assume full responsibility for all personal property, which I bring into the Work Release Unit.

If I am removed from the Work Release Program and placed in the regular jail population, it will be my responsibility to have all my personal property removed/claimed within five (5) days. I understand that after five (5) days, all my unclaimed property will be released to the regular jail property section where it will be destroyed or disposed of in accordance with the existing Revised Code of Washington after sixty (60) days.

I realize that the Department of Adult Detention is in no way responsible for my personal property, and I agree by signing this form, that the Department of Adult Detention be held harmless for any and all losses.

NAME _____ SIGNATURE _____ DATE _____

WITNESS _____ DATE _____

KING COUNTY/WORK EDUCATION RELEASE

SMOKING AND SMOKING MATERIALS POLICY

The King County Council has adopted an ordinance that prohibits smoking in King County buildings. The Department of Adult and Juvenile Detention must enforce that ordinance.

Work Release Program participants shall not smoke in the Facility. Work Release inmates shall not have cigarettes or other forms of tobacco in the Facility.

Violation of the above will result in removal from the Program, return to the Correctional Facility (JAIL) and LOSS OF GOOD TIME CREDITS.

Work Release inmates shall not have matches, lighters or other smoking related materials in their possession while in the facility. Violation of such possession rules (CONTRABAND) will result in the Program participant's time card being pulled (the participant will be unable to go out of the Facility) and the holding of a disciplinary hearing. Sanctions may include, and are not limited to, REMOVAL FROM THE PROGRAM, LOSS OF RECREATION PASSES, EXTRA DUTY, AND LOSS OF GOOD TIME CREDITS.

ACKNOWLEDGED:

SIGNATURE _____ DATE _____

WITNESS _____ DATE _____

KING COUNTY DEPARTMENT OF ADULT AND JUVENILE DETENTION
EMPLOYER ORIENTATION INFORMATION
*****TO BE FILLED OUT BY THE EMPLOYER ONLY*****

Employee's Name _____

Company Name _____ Company Telephone No. _____

Supervisor Name and Title _____

(Please make sure the signature is readable.)

Company Address _____

Jobsite Address _____ Jobsite Telephone No. _____

It is my understanding that while the employee named above is a participant in the Work Education Release/Electronic Home Monitoring Programs, all wages earned while under sentence must be mailed to the Community Corrections Program. This shall include any and all monies earned while the employee is in the program up to the date of release from detention. This is not an attachment of wages, but a request for transmittal of earnings. Do not mail any checks until instructed.

If the employee's schedule varies from week to week, please indicate.

☐ YES ☐ NO

If the employee's schedule remains the same each week, please complete the following work schedule.

Work Hours From Start Time to End Time

	FROM	TO	TOTAL HRS
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
TOTAL HRS. WORKED			

(NOT ALLOWED TO WORK MORE THAN 60 HOURS A WEEK OR A 7-DAY WEEK)

Rate of Pay: _____ How often paid _____

Is the employee required to drive a vehicle on the job? ☐ YES ☐ NO

Is the employee required to leave the job site at any time? ☐ YES ☐ NO If

Yes, please explain _____

Supervisor's Signature _____ Date _____

ITEMS WHICH CAN BE BROUGHT INTO THE WORK RELEASE UNIT
(For Work Release participants only)

NOTE: ALL RESIDENTS MUST BRING A LOCK WITH A SPARE KEY WHEN BOOKING INTO THE PROGRAM TO SECURE PERSONAL POSSESSIONS.

1. Clothing: supply of personal clothing is to be limited to necessities, due to lack of proper storage space. Staff will check clothing amounts periodically.
 - Shoes: limit 2 pairs
 - Shower slippers or thing: limit 1 pair.
 - Luggage: limit to actual need to be taken out if sentenced to 30 days or more. (Due to lack of storage.)
2. Coat hanger: limit to actual need to be taken out when released.
3. Alarm clocks: wind up or battery operated only, not electric.
4. Flashlight (small).
5. Shoe shine equipment: not electric.
6. Nail clipper and file.
7. Writing materials: pens, pencils, paper, stamps, envelopes.
8. Books and magazines: No pornographic magazines or books including Playboy, Hustler, and Playgirl.
9. Textbooks and school supplies: as needed.
10. Shaving and toiletry items:
 - a. Razor: standard safety razor or electric razor, no straight razors or continuous band razors;
 - b. Shaving cream and shaving soap;
 - c. After shave, cologne, talcum, hair oil, soap, shampoo, deodorant, tooth paste and powder, tooth brush, hair brush, and comb are allowed; **ITEMS IN GLASS CONTAINERS ARE NOT ALLOWED. ANY AEROSOL CONTAINERS OR AEROSOL FRAGRANCES IN GLASS CONTAINERS ARE NOT ALLOWED.**
 - d. Hair dryers
11. Small mirror: must be discarded if broken and cannot be hung on walls.
12. Games: games such as chess, checkers, word games, card games, etc. is allowed but **NO GAMBLING ALLOWED.**
13. Puzzles: jig saw, etc.
14. Art Supplies: art supplies are allowed if checked by staff. Items such as exacto knives, pallet knives, etc. are not allowed. **IF THE PRIVILEGE**
15. Pictures: pictures of family, etc. are allowed, but they are not to be

hung on the walls.

16. Unopened laundry soap and powdered bleach only allowed.
17. Towels, pillows, pillowcases and sleeping bags are allowed, and if brought in it must be marked.
18. All prescribed drugs must be turned over to the Correctional Staff who will dispense according to Standard Operating Procedures(SOP). Over-the-counter medications are allowed in accordance with the revised Keep on Person (KOP) policy and with the approval of the assigned caseworker.
19. Wristwatch, ring.
20. No pornographic pictures are allowed in the facility.

THE FOLLOWING ITEMS ARE NOT ALLOWED

1. Record player or records, Walkmans, headsets, electronic video games, beepers/pagers, cellular phones, radios and laptop computers.
2. Leather coats, excess jewelry and any other thing of value, IS NOT ALLOWED. Residents are not permitted to wear earrings/necklaces/bracelets or any items that are pierced into parts of their body while in the Program.
3. Electronic appliances.
4. Rugs.
5. Cameras.
6. Incense.
7. Tools.
8. Sunglasses or hats are not to be worn in the Unit.
9. No items, which can be construed to be weapons, pen knives, etc.
10. Any articles of value MUST be left at home.
11. Drugs (prescription or not) covered in Item 23.
12. No edible items - candy, fruit, gum, cookies.
13. No tobacco products, smoking paraphernalia and smokeless tobacco, lighters and matches.
14. No more than \$50 in cash on person. Small bills and coins are recommended, i.e. quarters and dimes.